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APPLICANTS

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** CONTINUING DATA ***
~~Y~~*****~~K~~*****

This application is a CON of 10/041,957 01/07/2002 and claims benefit of 60/314,580 08/23/2001
 and claims benefit of 60/337,504 12/06/2001
 and is a CIP of 10/013,816 10/19/2001 PAT 6,957,410

** FOREIGN APPLICATIONS ***
~~A~~ ~~V~~ ~~S~~*****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 02/19/2002

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after	CA	74	15	1
Verified and Acknowledged	<i>[Signature]</i> <i>[Initials]</i>	Examiner's Signature	Initials		

ADDRESS

48947

TITLE

Routing method and apparatus

FILING FEE RECEIVED 1340	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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